ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		August 1, 2007	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private Passenger Commercial			
Automobile Physical Damage Private Passenger Commercial			
Liability Other Than Auto	\$128,177	+12.0%	
4. Burglary and Theft	-		
5. Glass			
6. Fidelity			
7. Surety			
9 Poilor and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other Line of Insurance			
Does filing only apply to certain territory (ter	ritorios) or portain alocana? If an aposific	No	
boes ming only apply to certain territory (ter	Thomes) of certain classes? If so, specify.	NO	
Brief description of filing. (If filing follows rat Liability Rate Revision, 12.0 percent increas			
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whic	ch will result from application of new rates		
	Attack Daniel	od Casushi, Issues as Casas	
	Ашеа Ргорелту аг	d Casualty Insurance Company Name of Company	
	•	value or Company	
	Laurie R. Char	oman, Manager, State Filings	
	Edulio B. Oliaj	Official - Title	

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MAY - 3 2007

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		August 1, 2007	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial		<u> </u>	
2. Automobile Physical Damage			
Private Passenger Commercial 3. Liability Other Than Auto	\$555,016	+11.5%	
4. Burglary and Theft		<u> </u>	
5. Glass			
6 Fidolity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage		·	
13. Commercial Multi-Peril			
14. Crop Hail 15. Other			
Line of Insurance			
Does filing only apply to certain territory (te	rritories) or certain classes? If so, specify: <u>I</u>	No	
Brief description of filing (If filing follows ra	tes of an advisory organization, specify org	anization): Personal I Imbrella	
Liability Rate Revision, 11.5 percent increa		· ·	
Elability Trate Trevision, 11.0 percent mores			
*Adjusted to reflect all prior rate changes.			
**Change in Company's premium level whi	ch will result from application of new rates.		
	*****	_	
		nsurance Company	
	N	ame of Company	
	Laurie B. Chapr	nan, Manager, State Filings	
		Official – Title	

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Change in Company's premium or rate level produced by rate revision effective 10/01/2007 .

10,017	•	
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change $(+ or -)**$
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	162,247 (written premium)	+9.6%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		-
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
ll. Inland Marine		
l2. Homeowners		
13. Commercial Multi-Peril		
l4. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain	territory (territories)or	certain classes?
If so, specify: NA NO	continuity (continuity or	Concern Cresses.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Delay adoption of ISO Ref. Filing GL-2006-BGL1 until 10/01/2007.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

_	American Alternative Insurance Corporation
_	Name of Company
_	Stephen J. Corbett - Vice President
_	Official - Title

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ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto	499,772	9.0%
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety	-	
Boiler and Machinery		
). Fire		
Extended Coverage		
1. Inland Marine		
2. Homeowners		•••
Commercial Multi-Peril		
14. Crop Hail		
5. Other		
Line of Insurance		
Ooes filing only apply to certain territory (territory) Brief description of filing. (If filing follows rates	of an advisory organization, specify orga	
mplementing Insurance Services Office GL-2006-BGL1	(State Loss Costs) and GL-2006-IALL1 (Increased	Limit Factors) and increasing
he Loss Cost Multiplier from 1.575 to 1.583.		
tAdjusted to reflect all prior rate changes		
Adjusted to reflect all prior rate changes. *Change in Company's premium level which	will result from application of new rates.	
	American Casualty Company	w
	Na	ame of Company
	Max Mindel - Actuarial Consu	Itant
		Official – Title

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SUMMARY SHEET

FORM (RF-3)

(1)	(2) Annual Premium	(3) Percent
<u>overage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private Passenger		
Commercial Automobile Physical Damage Private Passenger		
Commercial		
Liability Other Than Auto	\$83,673	12% (\$10,041)
. Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
). Extended Coverage		
1. Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail		
5. Other		

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): We are filing revisions for our Non-Profit Directors and Officers Program which result in an overall average change of 12.0%. The effective date for this change is August 1, 2007 for new business and October 1, 2007 for renewals. The details of the rate revision are provided in the memorandum. This is our first rate revision, since the initial implementation of our Non-Profit Directors and Officers Program on 04/01/06.

* Written Premium - Adjusted to reflect all prior rate changes (Use calendar year-end premium from Premium Accounting Summary of QOR)

DIVISION OF REVEANDEUM level which will result from application of new rates.

STATE OF ILLINOIS/IDEPR

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SPRINGFIELD, ILLINOIS

AMERICAN FAMILY MUTUAL INS. CO.

Name of Company Christa Adler Competitive Pricing Research Analyst Official - Title

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MAY 0 2 2007

SPRINGFIELD, ILLINOIS

50 ILLINOIS ADMINISTRATIVE CODE

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET



Change in Company's effective <u>07-01-2007</u>	premium or rate level produced by	rate revision
(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or

		Annual Premium	rercent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger		0.00%
	Commercial		0.00%
2.	Automobile Physical Damage		
	Private Passenger		0.00%
	Commercial		0.00%
3.	Liability Other Than Auto	\$416,662	15.00%
4.	Burglary and Theft		0.00%
5.	Glass		0.00%
6.	Fidelity		0.00%
7.	Surety		0.00%
8.	Boiler and Machinery		0.00%
9.	Fire		0.00%
10.	Extended Coverage		0.00%
11.	Inland Marine		0.00%
12.	Homeowners		0.00%
13.	Commercial Multi-Peril		0.00%
14.	Crop Hail		0.00%
15.	Other		0.00%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Applies countrywide to the Retail Grocers Commercial Umbrella Program.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Modifying the commercial umbrella minimum premium and rate charged per unit for the medium sized truck, heavy truck and tractor trailer.

*Adjusted to reflect all prior rate changes.

Life of Insurance

**Change in Company's premium level which will result from application of new rates.

Argonaut Great Central Insurance Company

Name of Company

Mark Lucas, Secretary, AGCIC

Official--Title

SOS - ISE - CODE UNITE

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate lev	el produced by rate revision effective	07/23/07
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial _		
 Automobile Physical Damage Private Passenger Commercial _ 		
3. Liability Other Than Auto	\$1.112.516	+6.1%
Burglary and Theft	V 7 7 1 1 1 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire _		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		· · · · · · · · · · · · · · · · · · ·
13. Commercial Multi-Peril _		
14. Crop Hail		
15. Other		
Line of insurance		
Does filing only apply to certain territory (t	erritories) or certain classes? If so, specify: 1	No
	rates of an advisory organization, specify org	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level wh	nich will result from application of new rates.	
	Chubb Natio	nal Insurance Company ame of Company
	Fran	Muldoon, AVP
		Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		6/1/2007		
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>		(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private			
_	Passenger Commercial			
2.	Automobile Physical Damage			
_	Private Passenger Commercial		_	7.00
3.	Liability Other Than Auto	1,971,517		7.2%
4.	Burglary and Theft	<u></u>		
5.	Glass			
6. 7	Fidelity			
7. 8.	Surety Boiler and Machinery		-	
9.	Fire			
	Extended Coverage		<u> </u>	· · · · · · · · · · · · · · · · · · ·
	Inland Marine		_	
	Homeowners		-	
	Commercial Multi-Peril			
	Crop Hail			
	Other		_	
	Line of Insurance			
Brid	es filing only apply to certain territory (to ef description of filing. (If filing follows ra lementing Insurance Services Office GL-2006-Bo Loss Cost Multiplier from 1.575 to 1.583.	ates of an advisory organization, specif	y organizatio	
	fjusted to reflect all prior rate changes. Change in Company's premium level wh	ich will result from application of new r	ates.	
		Continental Casualty (Company	
		Outrinement Casaumy (Name of C	Company
		Adam Affin da L. A abasa sind		
		Max Mindel - Actuarial Consultant Official - Title		Title
			Official -	RECEIVED
				MAY - 8 2007

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	<u>Volume (Illinois)*</u>	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial	_	
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto	1,546,032	8.7%
4. Burglary and Theft		
5. Glass		
5. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	Ma
Brief description of filing. (If filing follows	rates of an advisory organization, specify organ	nization):
mplementing Insurance Services Office GL-2006	-BGL1 (State Loss Costs) and GL-2006-IALL1 (Increased I	Limit Factors) and increasing
he Loss Cost Multiplier from 1.575 to 1.583.		
*Adjusted to reflect all prior rate change		
*Change in Company's premium level	which will result from application of new rates.	
	Continental Insurance Company	ny .
	Nar	me of Company
	Max Mindel - Actuarial Consult	ant

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ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 12/1/2007 (3) (1) (2) **Annual Premium** Percent Volume (Illinois)* Change (+ or -)** Coverage Automobile Liability Commercial 2. Automobile Physical Damage Commercial 3, Liability Other Than Auto 406 **Burglary and Theft** 4. 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): adoption of ISO Filing Designation number GL-2006-RCTLC and GL-2006-OCTRU. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates.

Crum & Forster Indemnity Company

Name of Company

Ruth A. Overholser, Regulatory Compliance Analyst

Official - Title

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ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		August 1, 2007	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial 2. Automobile Physical Damage			
3. Liability Other Than Auto	\$48,645	+11.8%	
4. Burglary and Theft	4.0,0.0		
5 Glace			
6. Fidelity			
7. Surety			
Boiler and Machinery			
9. Fire			
11. Inland Marine			
12. Homeowners			
15. OtherLine of Insurance			
Line of instrance			
Does filing only apply to certain territory (ter	ritories) or certain classes? If so, specify	: No	
Brief description of filing. (If filing follows rate	se of an advisory proprietation, specify or	eganization): Porconal Umbrolla	
Liability Rate Revision, 11.8 percent increas		,	
Elability (Valo (Vovision), 11.0 percent increas	<u>~</u>	***************************************	
*Adjusted to reflect all prior rate changes.			
**Change in Company's premium level whic	h will result from application of new rates	3 .	
	Depositors Insurance Company		
		Name of Company	
	Lauria B. Chai	oman Managar State Filings	
	Laurie B. Cha	oman, Manager, State Filings Official – Title	
		Cinotal Title	

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MAY - 3 2007

DIVISION OF INJURANCE TATE OF ILLINOISUDERS MAY 1 8 2007

Form (RF-3)

Change in Company's premium or rate level produced by rate revision effective 5/1/2014LD, ILLINOIS

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	2,545	+9.6%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does t	filing only apply to certain territory (territories) or certain classes? If so, specif	v:
		ories and classes as promulgated by	
		es ania enaceca ac promasgarea es	
Ado	option of ISO loss cost filing G	vs rates of an advisory organization, specif L-2006-BGL1, Territory Definition	
KZI	P1 and Increased Limit Factor	S GL-2000-IALL I	

* Adjusted to reflect all prior rate changes.

The Employers' Fire Ins. Co.

Name of Company

John Cordner, Compliance Specialist
Official - Title

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^{**} Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

nange in Company's premium or rate	e level produced by rate revision effective	August 1, 2007
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial	<u> </u>	
Automobile Physical Damage		
Private Passenger Commercia Liability Other Than Auto	al	
Liability Other Than Auto	70,327	5.3%
Burglary and Theft	<u> </u>	
Glass	(Included in Fire & Extended Coverage)	
Fidelity	·	
Surety		<u> </u>
Boiler and Machinery	<u>-</u>	
Fire		
. Extended Coverage	<u> </u>	
. Inland Marine		
. Homeowners	<u> </u>	
Commercial Multi-Peril	3,047,091	6.1%
. Crop Hail		
i. Other		
Line of Insurance		
ief description of filing. (If filing follow	ry (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify organization (SC) loss costs (GL-2005-BGL1) and updating their loss cost materials.	
Adjusted to reflect all prior rate chang Change in Company's premium leve	ges. (Year Earned is 2005) If which will result from application of new rates.	
	FCCI Ins	urance Company
	Name	e of Company
	Debra J. Comstock	, Regulatory Filing Specialist
	Off	icial – Title



FORM (RF-3) SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

May 21, 2007 New Business, August 1, 2007 Renewals

Coverage Automobile Liability Private	Volume (Illinois)*	Change (+ or -)**
•		,
Passenger		
Commercial		
Automobile Physical Damage		
Private Passenger		
Commercial		
Liability Other than Auto	7,583,280	0.0%
Burglary and Theft		<u> </u>
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		····
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Line of Insurance		
Does filing only apply to certain te	erritory (territories) or certain class	ses?
If so, specify		
No. The filing applies to a	all territories, all classes	
Brief Description of filing. (If filing		
organization, specify organization		
Introducing new attachment po		ccurrence underlying
Auto limit and for >\$300,000 un	iderlying NonAuto limit.	
1* A .1:		
'*Adjusted to reflect all prior rate		
	n laval which will recult from anni-	cation of
**Change in Company's premiun	it level willen will result from appli-	
	miever which will result from appli	
**Change in Company's premiun	Farmers Insuran	

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

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SPRINGFIELD, ILLINOIS

Frances Sarrel, FCAS, Assistant Actuary

Official--Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	vel produced by rate revision effective	07/23/07
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial _		- 0.404
3. Liability Other Than Auto	\$4,363,925	+6,1%
4. Burglary and Theft		
5. Glass		
6. Fidelity7. Surety		
8. Boiler and Machinery		· · · · · · · · · · · · · · · · · · ·
9. Fire		
10. Extended Coverage	****	
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
5 5 0		
Does filing only apply to certain territory (territories) or certain classes? If so, specify:	No
Brief description of filing (If filing follows a	rates of an advisory organization, specify or	ganization): Personal Excess Liability
	rates of all advisory organization, specify or	-
tate onange		
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level wh	nich will result from application of new rates.	•
		Insurance Company
	1	Name of Company
	5	m Muddaan AVD
	Fra	n Muldoon, AVP Official – Title
		Ciliadi IIII



SUMMARY SHEET

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$2,820,798	+9.6%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does fi N/A	iling only apply to certain territory (te	erritories) or certain classes? If so, specify:	

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Frankenmuth Mutual Insurance Com Name of Company

Alice Jaruzel R&D Analyst II

Official - Title

Form (RF-3)		SUMMARY SHEET	SPRINGFIELD, ILLINOIS
C	Change in Company's premium or rate	level produced by rate revision effective	SFRINGFIELD, ILLI
	(1)	(2)	(3) NO/8
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger		
3.	Commercial Liability Other Than Auto	\$2,820,798	+0.6%
3. 4.	Burglary and Theft	\$2,620,736	10.076
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does fi N/A		ritories) or certain classes? If so, specif	ÿ:
		rates of an advisory organization, specif	
Адори	on of ISO Filing designation GL-2006	-IALLI	DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR
* Ad	justed to reflect all prior rate changes.		RECEIVED
** Ch	ange in Company's premium level wh ult from application of new rates.		MAY 0 9 2007
		_F an	kegarangaalakeess
			Name of Company
		Alia	e Jaruzel
			o Analyst II
		Kal	Official - Title
			O 11101001 1 1010

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/01/2007 New Business and 09/01/2007 Renewal Business

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -) **
Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability other than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril* Crop Hail	134,067 (Personal Umbrella)	4 6.5%
classes? If so, specify: Brief description of filing. (If filing.)	No No solution of the solution	
organization, specify organization)	Changes were made to: Binding Gu	ides and Additional Premium charges
	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability other than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril* Crop Hail Other Does filing only apply to certain to classes? If so, specify: Brief description of filing. (If filing organization, specify organization)	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability other than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril* Crop Hail Other Annual Premium Volume (Illinois)* 134,067 (Personal Umbrella) 134,067 (Personal Umbrella) 134,067 (Personal Umbrella) 134,067 (Personal Umbrella)

Grange Mutual Casualty Company
Name of Company

Stephanie Christman - Product Manager Official - Title

^{**} Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate	level produced by rate revision effective	07/23/07
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
Liability Other Than Auto	\$2,169,514	+6.1%
Burglary and Theft	VA. 100 101	
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Elife of modulios		
Does filing only apply to certain territory	(territories) or certain classes? If so, specif	y: <u>No</u>
	s rates of an advisory organization, specify	
*Adjusted to reflect all prior rate change **Change in Company's premium level	es. which will result from application of new rate	9S.
	Great No	rthern Insurance Company
	Great No	Name of Company
	F	Fran Muldoon, AVP
		Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

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SPRINGFIELD, ILLINOIS

<u>-</u>	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **	
١.	Automobile Liability Private	Totalita (iiiii)		
••	Passenger			
	Commercial	· · · · · · · · · · · · · · · · · · ·		
	Automobile Physical Damag			
	Private Passenger			
	Commercial			
	Liability Other Than Auto	341,865	-6.15	
	Burglary and Theft			
	Glass			
	Fidelity			
	Surety			
	Boiler and Machinery			
	Fire			
0.	Extended Coverage			
1.	Inland Marine			
2.	Homeowners			
3.	Commercial Multi-Peril			
4.	Crop Hail			
5.	Other			
	Life of Insurance			
	Does filing only apply to certain territory (territories) or certain Classes? If so,			
		ee classes below		
	Brief description of filing. (If f	iling follows rates of an a	dvisorv	
			•	
	Organization, specify	-		
	Organization, specify organization):	_Adjust rates f	or certain classes by	
	Organization, specify organization): territory and reduce al	Adjust rates f	or certain classes by	
	Organization, specify organization): territory and reduce al selected class exception a *Adjusted to reflect all prior retains the selected class exception a *Change in Company's prentition.	Adjust rates f l other Premises/Open re listed below. ate changes.	or certain classes by ations rates by 6.0%. The	
	Organization, specify organization): territory and reduce alselected class exception a *Adjusted to reflect all prior rates.	Adjust rates for the premises/Open re listed below at changes. The premises of the premises o	or certain classes by ations rates by 6.0%. The	
	Organization, specify organization): territory and reduce alselected class exception a *Adjusted to reflect all prior rates. 91324, 91340, 91341, 91342	Adjust rates for the premises/Open re listed below at changes. The premises will result to the premises of the	or certain classes by ations rates by 6.0%. The ations rates by 6.0%. The ation of new American Insurance Compa	
	Organization, specify organization): territory and reduce alselected class exception at *Adjusted to reflect all prior rates. 91324, 91340, 91341, 91342, 91405, 92054, 92055, 92101	Adjust rates f l other Premises/Open re listed below. ate changes. hium level which will resu , 91343,	or certain classes by ations rates by 6.0%. The ations rates by 6.0%.	
	Organization, specify organization): territory and reduce al selected class exception at *Adjusted to reflect all prior rates. 91324, 91340, 91341, 91342, 91405, 92054, 92055, 92101, 92215, 92338, 98426, 98427, 98449, 98482, 98483, 91111	_Adjust rates f 1 other Premises/Opera re listed below. ate changes. nium level which will resu , 91343,	or certain classes by ations rates by 6.0%. The ations application of new american Insurance Company are of Company ray Barber - Compliance	
	Organization, specify organization): territory and reduce alselected class exception at *Adjusted to reflect all prior rates. 91324, 91340, 91341, 91342, 91405, 92054, 92055, 92101	Adjust rates f 1 other Premises/Opera re listed below. ate changes. nium level which will resu , 91343,	or certain classes by ations rates by 6.0%. The ations rates by 6.0%.	

Section 754.EXHIBIT A Summary Shoot (Form RF-3)

94007, 94276, 94569, 95410 95647, 96053, 96816, 97047, 97447, 98305, 98304, 98967

99303, 99746

FORM (RF-3)

SUMMARY SHEET

\int	DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED	_
1	MAY 0 7 2007	

Change in Company's premium or rate level produced by rate redsing FIELD, ILLINOIS (2) (1) (3) Annual Premium Percent Volume (Illinois) * Change (+or-) ** Coverage **Automobile Liability Private** Passenger Commercial 2 **Automobile Physical Damag** Private Passenger Commercial 1,094,992 -6.15 3. Liability Other Than Auto 4. **Burgiary and Theft** 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Life of Insurance Does filing only apply to certain territory (territories) or certain Classes? If so, specify: See classes below Brief description of filing. (If filing follows rates of an advisory Organization, specify Adjust rates for certain classes by organization): territory and reduce all other Premises/Operations rates by 6.0%. The selected class exceptions are listed below. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. 91324, 91340, 91341, 91342, 91343, 91405, Iowa Mutual Insurance Company **9**2054, 92055, 92101, 92102, 92215, 92338, Name of Company 98426, 98427, 98429, 98449, 98482, 98483, Beverly Barber - Compliance 91111, 91155, 91436, 91560, 91746, 92478,

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	nge in Company's premium or rate le	evel produced by rate revision effective	August 1, 2007
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	<u>Volume (Illinois)*</u>	<u> Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial	-	
2.	Automobile Physical Damage		
	Private Passenger Commercial		<u></u>
3.	Liability Other Than Auto	123,091	6.9%
4.	Burglary and Theft		
5.	Glass	(Included in Fire & Extended Coverage)	<u></u>
3.	Fidelity	_	
7.	Surety	-	
В.	Boiler and Machinery	<u> </u>	
9.	Fire	-	
	Extended Coverage		
	Intand Marine	<u> </u>	
	Homeowners	4 050 075	8.2%
	Commercial Multi-Peril	1,850,375	8.270
	Crop Hail		
15.	OtherLine of Insurance	<u> </u>	
	Line of insurance		
Doe	s filing only apply to certain territory ((territories) or certain classes? If so, specify:	NO
	- mild cruy apply to contain territory (
			· .
		rates of an advisory organization, specify orga	
/loni	oe Guaranty Insurance Company is adopting a	pproved ISO loss costs (GL-2005-BGL1) and updating the	r loss cost multipliers.
	usted to reflect all prior rate changes		
*CI	nange in Company's premium level w	hich will result from application of new rates.	
		Monroe Guara	nty Insurance Company
			e of Company
			•
			, Regulatory Filing Specialist
		Of	ficial – Title



DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

MAY 1 5 2007

Form (RF-3)

SPRINGFIELD, ILLINOIS
SUMMARY SHEET

(Change in Company's premium or rat	e level produced by rate revision effective	e June 1, 2007
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
2	Commercial		
2.	Automobile Physical Damage Private Passenger		
_	Commercial		10.050/
3.	Liability Other Than Auto	51,836	+10.25%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11. 12.	Inland Marine		
12. 13.	Homeowners Commercial Multi-Peril		
13. 14.			
14. 15.	Crop Hail Other		
15.	Line of Insurance		
No			
Insu	rance Services office, Inc. (ISC	s rates of an advisory organization, specif)	
	ption of the following reference P1, and GL-2006-IALL1	e filings: GL-2006-BGL1, GL-20	006-RZPLC, GL-2006-
** Cl	djusted to reflect all prior rate change hange in Company's premium level v sult from application of new rates.	es. which will	
		Na	tional American Insurance
			Name of Company
			1 7
		Ion	mifer Carr, Rate & Form
		_ <u>An</u>	alystOfficial - Title
			Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1)	(2)	(3)
• •	Annual Premium Volume (Illinois)*	Percent Cha <u>nge (+ or -)**</u>
<u>Coverage</u>	volume (minois)	Change (* or -)
. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto	3,794,952	5.5%
Burglary and Theft		
5. Glass		
5. Fidelity		
7. Surety		
B. Boiler and Machinery		
). Fire		
0. Extended Coverage		
1. Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail		
5. Other		
Line of Insurance		
		1
Does filing only apply to certain territory (territo	ories) or certain classes? If so, specify:	_ NA
	of an advisor, amonimation appoint, and	roni-otion).
Brief description of filing. (If filing follows rates		
mplementing Insurance Services Office GL-2006-BGL1	(State Loss Costs) and GL-2006-IALL1 (Increase	ed Limit Factors) and increasing
he Loss Cost Multiplier from 1.575 to 1.583.		
Adjusted to reflect all prior rate changes.		

National Fire Insurance Company

Name of Company

Max Mindel - Actuarial Consultant

Official =

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Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

	(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>		Volume (Illinois)*	Change (+ or -)**
	bile Liability Private		
	ssenger Commercial		
	bile Physical Damage		
	rate Passenger Commercial	-	
•	Other Than Auto	6,070	3.0%
	y and Theft		
. Glass		(Included in Fire & Extended Coverage)	
FidelitySurety			
	nd Machinery		
. Boilei a . Fire	ite Machinery		· · · · · · · · · · · · · · · · · · ·
	ed Coverage		
1. Inland			
2. Homeo			
3. Comme	ercial Multi-Peril	691,843	8.6%
4. Crop H	ail		
5. Other			-
_	Line of Insurance		
rief descrip	otion of filing. (If filing follows r	ates of an advisory organization, specify organ	
ational Trust I	nsurance Company is adopting appro-	ved ISO loss costs (GL-2005-BGL1) and updating their los	s cost multipliers.
	reflect all prior rate changes.		
*Change in	Company's premium level wh	nich will result from application of new rates.	
		National Trus	t Insurance Company
		Name	e of Company
		Debra J. Comstock	Regulatory Filing Specialist
			icial Titlo



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision effective	August 1, 2007
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	\$127	+14.0%
4. Burglary and Theft	Ψ1Ζ1	114.070
5. Glass	_	
6. Fidelity	-	
7 Suratu		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (terri	tories) or certain classes? If so, specify	: No
Brief description of filing. (If filing follows rates Liability Rate Revision, 14.0 percent increase		,
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level which	will result from application of new rates	3 .
	Nationwide !	Mutual Incurance Campany
		Mutual Insurance Company Name of Company
		reality of Company
	Laurie B. Chai	oman, Manager, State Filings
		Official – Title

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ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 12/1/2007 (1) (2) (3) **Annual Premium** Percent Volume (Illinois)* Coverage Change (+ or -)** Automobile Liability Commercial 2. Automobile Physical Damage Commercial Liability Other Than Auto 3. 4,570,674 4. **Burglary and Theft** 5. Glass 6. **Fidelity** 7. Surety 8. **Boiler and Machinery** 9. 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): adoption of ISO Filing Designation number GL-2006-RCTLC and GL-2006-OCTRU. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. The North River Insurance Company Name of Company

Ruth A. Overholser, Regulatory Compliance Analyst

Official - Title

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MAY 2 1 2007

MAY 1 8 2007

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Form (RF-3)

SUMMARY	SHEET SPRINGFIEL	D, ILLINOIS

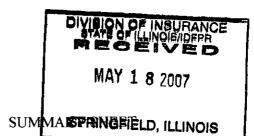
(Change in Company's premium or rate	e level produced by rate revision effective	6/1/2007
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	822,902	+9.6%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
oes f	iling only apply to certain territory (to This filing applies to all territor	erritories) or certain classes? If so, specify: ries and classes as promulgated by IS	SO
Ado	description of filing. (If filing follows option of ISO loss cost filing GLP1 and Increased Limit Factors	s rates of an advisory organization, specify of 2006-BGL1, Territory Definitions GL-2006-IALL1	organization): (ZIP codes) GL-2006-
* 4	directed to unfloat all major rate about a	•	
	djusted to reflect all prior rate change hange in Company's premium level w		
		ALLEWAN VIALE	
ге	sult from application of new rates.		

OneBeacon America Ins. Co.

Name of Company

John Cordner, Compliance Specialist
Official - Title

H29219D



•	Change in Company's premium or rate	e level produced by rate revision effective	6/1/2007
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	25,839	+9.6%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (te	erritories) or certain classes? If so, specify:	
No.	This filing applies to all territor	ies and classes as promulgated by IS	SO
Brief o	description of filing. (If filing follows	rates of an advisory organization, specify	organization):
Ado	ption of ISO loss cost filing GL	-2006-BGL1, Territory Definitions	(ZIP codes) GL-2006-
	P1 and Increased Limit Factors		,
	djusted to reflect all prior rate changes		
** C	hange in Company's premium level wi	hich will	

OneBeacon Insurance Co.

Name of Company

John Cordner, Compliance Specialist
Official - Title

result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate lev	el produced by rate revision effective	07/23/07
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial	***	
Private Passenger Commercial _		
3. Liability Other Than Auto	\$447,282	+6.1%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
 Surety Boiler and Machinery 		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance	<u> </u>	
Does filing only apply to certain territory (te	erritories) or certain classes? If so, specify:	No
Brief description of filing. (If filing follows ra	ates of an advisory organization, specify or	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whi	ich will result from application of new rates	
	Pacific	Indemnity Company
		lame of Company
	Fra	n Muldoon, AVP
		Official – Title

SUMMARY SHEET

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

MAY - 3 2007

Change in Company's premium or rate level propries Change in Ch revision effective 6-1-2007

	(1)	(2)		(3)
		Annual	Premium		Percent
<u>Co</u> 7	verage	Volume (1	llinois)*	Chan	ige (+ or -)**
1. Automobile 1 Private Pa Commercia	assenger				
2. Automobile : Private Pa Commercia	-				
3. Liability O	ther Than Auto		111,296		+1.2%
4. Burglary and	d Theft		·	·	
5. Glass					·
6. Fidelity					
7. Surety					
8. Boiler and 1	Machinery				
9. Fire	-				
10. Extended Co	verage				
11. Inland Mari				 · ·	
12. Homeowners					
13. Commercial 1	Multi-Peril				
14. Crop Hail					
15. Other					
Lir	ne of Insurance			•	
Does filing onl	y apply to certain	territory (territories)	or certain	n classes?

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): This filing is to adopt the latest ISO ILF's for Illinois General Liability.

Iso Circular LI-GL-2006-387

Iso designation GL-2006-IAll1

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

 Sentry	Select	Insurance	Company
	Name o	of Company	

Dennis Homann Compliance/Development Senior Analyst Official - Title

H29219D

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective			June 1, 2007		
	(1)	(2) Annual Premium	(3) Percent		
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>		
1.	Automobile Liability				
	Private Passenger Commercial				
2.	Automobile Physical Damage Private Passenger Commercial				
3.	Liability Other Than Auto	2,500	+10.25		
4.	Burglary and Theft	2,000			
5.	Glass	· · · · · · · · · · · · · · · · · · ·			
6.	Fidelity				
7.	Surety				
8.	Boiler and Machinery				
9.	Fire				
10.	Extended Coverage				
11.	Inland Marine				
12.	Homeowners				
13.	Commercial Multi-Peril				
14.	Crop Hail				
15.	Other				
	Line of Insurance		DIVISION		
Does t No.	filing only apply to certain territory (territories) or certain classes? If so, speci	fy: Neuron		
			May		
			/ "" 4 2007		
		s rates of an advisory organization, specif	y organization):		
	Organization: Insurance Services O		SPRINGER		
		Advisory Prospective Loss Costs Revise			
		al Liability Loss Costs to Reflect Zip Cod	e Territory Definitions		
	006-RZIP1 – Illinois General Liabilit 1006-IALL1 – Illinois General Liabilit				
UL-2U	00-TALLI - IIIIIOIS General Liaoint	y increased Limit ractors Revised			

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

> State National Insurance Company Name of Company

Senior Vice President and General Counsel Official - Title

12. Homeowners

14. Crop Hail15. Other

13. Commercial Multi-Peril

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate leve	el produced by rate revision effective	6/1/2007
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	817,647	8.7%
4.	Burglary and Theft		
5 .	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	***************************************	
10.	Extended Coverage		
11.	Inland Marine		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Implementing Insurance Services Office GL-2006-BGL1 (State Loss Costs) and GL-2006-IALL1 (Increased Limit Factors) and increasing the Loss Cost Multiplier from 1.575 to 1.583.

Line of Insurance

Transportation Insurance Company

Name of Company

Max Mindel - Actuarial Consultant

Official - Title



^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

Form	(RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/01/2007 New Business and 09/01/2007 Renewal Business

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	Automobile Liability		
	Private Passenger		
	Commercial Automobile Physical Damage		
	Private Passenger		
	Commercial		
	Liability other than Auto	112,385 (Personal Umbrella)	+ 6.63%
	Burglary and Theft		
-	Glass		
	Fidelity		
	Surety Boiler and Machinery	· · · · · · · · · · · · · · · · · · ·	
9.			
	Extended Coverage		
1 .	Inland Marine		
	Homeowners		
	Commercial Multi-Peril*		
	Crop Hail Other		
· ·			
	ana filina anhi annhi ta antain ta	anita (kanikudaa) aa aastain	
D	oes filing only apply to certain te asses? If so, specify: <u>No</u>	erritory (territories) or certain	-
D dd	asses? If so, specify: No		
D dd	asses? If so, specify: No	follows rates of an advisory	
D cl	rief description of filing. (If filing rganization):	follows rates of an advisory Changes were made to: Binding Gu	
D cl	rief description of filing. (If filing rganization, specify organization):	follows rates of an advisory Changes were made to: Binding Gui te changes.	

Trustgard Insurance Company
Name of Company

Stephanie Christman - Product Manager Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 12/1/2007

(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
 Automobile Liability Commercial Automobile Physical Damage Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail 	935,093	0
NO	ws rates of an advisory organization, specify or	
*Adjusted to reflect all prior rate chang **Change in Company's premium level	which will result from application of new rates United States Fire Insurance Control	

Ruth A. Overholser, Regulatory Compliance Analyst

Official - Title

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MAY 2 1 2007

DIVISION OF INSURANCE STATE OF LANCISHIPPR

MAY 2 2 2007

SUMMARY SHEET

Form (RF-3)

SPRINCFIE UNIVOIS
Change in Company's premium or rate level produced by rate revision effective

Upon Earliest Possible Approval

		(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Privat	obile Liability e Passenger nercial		
2.	Privat	obile Physical Damage e Passenger nercial		
3.	Liabilit	y Other Than Auto	4,327,915	-12.9%
4.		y and Theft		
5.	Glass			
6.	Fidelity	•		
7.	Surety			
8.	Boiler a	and Machinery		
9.	Fire		151,216	-13.6%
0.		ed Coverage		
1.	Inland			
2.	Homeo		-	
3.		ercial Multi-Peril		
4.	Crop H			
15.	Other	Optional coverages	Included in Prem totals above,	1.1%
		allocated to Liability	which were extracted directly	
			from Statutory Page 14	
		Property LOBs. Line of Insurance	from Statutory Page 14	
Does f No	iling only	apply to certain territory (t	erritories) or certain classes? If so, speci	ify:

Revision of Businessowners rates including adoption of new ISO Loss Costs and ILFs, revision of property base rates, territorial multipliers and protection class factors, and revision of rates and rules for various optional coverages.

* Adjusted to reflect all prior rate changes.

United States Liability Ins. Co.
Name of Company

Patricia E. Ivey, Asst. Actuary
Official - Title

^{**} Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
. Automobile Liability Private		
Passenger Commercial		
. Automobile Physical Damage Private Passenger Commercial		
Liability Other Than Auto	2,480,761	8.6%
Burglary and Theft	2,400,701	0.0%
Glass		
5. Fidelity	· · · · · · · · · · · · · · · · · · ·	-
. Surety		
B. Boiler and Machinery		·····
. Fire		
0. Extended Coverage		
1. Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail		
5. Other		
Line of Insurance		
oes filing only apply to certain territory (terr	itories) or certain classes? If so, specify:	n_v
Brief description of filing. (If filing follows rate		
nplementing Insurance Services Office GL-2006-BGL	1 (State Loss Costs) and GL-2006-IALL1 (Increased	Limit Factors) and increasing
e Loss Cost Multiplier from 1.575 to 1.583.		
Adjusted to reflect all prior rate changes.	W 11.5 17.11.5	
*Change in Company's premium level whicl	will result from application of new rates.	
	Valley Forge Insurance Comp	pany
	N:	ame of Company
	Max Mindel - Actuarial Consu	iltant
		Official Title

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ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective _		07/23/07	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial			
Automobile Physical Damage Private Passenger Commercial			
Liability Other Than Auto	\$1,313,216	+6.1%	
Burglary and Theft	V1101212		
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
 Extended Coverage Inland Marine 	-		
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other Line of Insurance			
Dana Silina and annah, ta anntain tamitan, ((Assertacion) or contain places 2 If an appoint	N ₌	
Does niing only apply to certain territory ((territories) or certain classes? If so, specify:	NO	
	rates of an advisory organization, specify o	-	
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	:. hich will result from application of new rates	s.	
	Vioilan	Insurance Company	
	Vigilari	Name of Company	
	E-	an Muldoon, AVP	
		Official – Title	